

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL	Application No.	10/036,989
	Filing Date	November 6, 2001
	First Named Inventor	Simon
	Group Art Unit	1615
	Examiner Name	L. Di Nola Baron
	Attorney Docket No.	61350A
	Express Mail Label No.	

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application. **Note:** 37 CFR §1.114 is effective on May 29, 2000. If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 CFR §1.53(d) instead of a RCE to be eligible for the patent term adjustment provisions of the AIPA.

1. Submission required under 37 CFR §1.114**a. Previously submitted**

- i. ☒ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on August 29, 2003 (any unentered amendment(s) referred to above will be entered)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other: _____

b. Enclosed

- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other: _____

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR §1.17(i) required)
- b. ☐ Other: _____

3. Fees (The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.)

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No. 04-1512.
- i. ☒ RCE fee of \$770 required under 37 CFR §1.17
- ii. ☐ Extension of time fee (37 CFR §§ 1.136 and 1.17)
- iii. ☐ Other: _____
- b. ☐ Check in the amount of \$ _____ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

NEW CORRESPONDENCE ADDRESS

☒ Customer Number 00109 or ☐ Correspondence address below

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CITY	STATE	ZIP CODE	

SIGNATURE OF ATTORNEY/AGENT REQUIRED

SIGNATURE
NAME
REGISTRATION NO.
DATE

Elisabeth T. Jozwiak
Elisabeth T. Jozwiak
41101
October 27, 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent & Trademark Office on:

703-872-9307

NAME	Christina J. Wenzel	DATE	October 30, 2003
SIGNATURE	<i>Christina J. Wenzel</i>		

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If this RECEIPT is included with a request for a RCE filed by facsimile transmission, it will be date stamped and mailed to the ADDRESS in Item 1.

1. ADDRESS

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NOTE: By this receipt, the PTO (a) acknowledges that a request for a RCE was filed by facsimile transmission on the date stamped below by the PTO and (b) verifies only that the application number provided by the applicant on this receipt is the same as the application number provided on the accompanying request for a RCE. This receipt CANNOT be used to acknowledge receipt of any paper(s) other than the request for a RCE.

2. APPLICATION IDENTIFICATION:

(Provide at least enough information to identify the application)

a. For prior application

Application No: 10/036,989 _____

Filing Date: November 6, 2001 _____

Title: IN VIVO USE OF WATER ABSORBENT POLYMERS _____

Attorney Docket No: 61350A _____

First Named Inventor: Jaime Simon _____

b. For instant RCE application

New Attorney Docket No: _____
(if applicable)

The PTO date stamp, which appears in the box to the right, is an acknowledgment by the PTO of receipt of a request for a RCE filed by facsimile transmission on the date indicated below.

(THIS AREA FOR PTO DATE STAMP USE)

PTO HANDLING INSTRUCTIONS:

Please stamp area to the right with the date the complete transmission of the request for a RCE was received in the PTO and also include the PTO organization name that provided the date stamp (stamp may include both items). Verify that the application number provided by applicant on this receipt is the same as the application number provided by applicant on the request for a RCE accompanying this receipt. If there is an inconsistency between the application number provided on this receipt and the request for a RCE, strike through the inconsistent application number provided on this receipt and insert the correct application number, if possible. Then place in a window envelope and mail.